

PLAINTIFF <b>UNITED STATES OF AMERICA</b>		COURT CASE NUMBER 2:06cr271-WKW				
DEFENDANT <b>COREY HARVEY</b>		TYPE OF PROCESS FINAL ORDER OF FORFEITURE				
<b>SERVE AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>ONE HI-POINT, MODEL C9, 9MM, SEMI-AUTOMATIC PISTOL, BEARING SERIAL NUMBER P134645</b>					
	ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code) <b>c/o UNITED STATES MARSHALS SERVICE</b>					
SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:  <b>Tommie Brown Hardwick Assistant United States Attorney United States Attorney's Office Post Office Box 197 Montgomery, Alabama 36101-0197</b>		Number of process to be served with this Form - 285 <b>1</b>				
<b>RETURNED AND FILED</b>  <b>AUG 22</b>		Number of parties to be served in this case				
		Check for service on U.S.A.				
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)  <b>Asset Identification No. 07-DEA-478331</b>  <b>CLERK U. S. DISTRICT COURT MIDDLE DIST. OF ALA.</b>						
Signature of Attorney or other Originator requesting service on behalf of: <i>Tommie Brown Hardwick</i>		<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER <b>(334) 223-7280</b>  DATE <b>07/17/08</b>			
<b>SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE</b>						
I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. <b>2</b>	District to Serve No. <b>2</b>	Signature of Authorized USMS Deputy or Clerk <i>K. Chavers</i>	Date <b>7/18/08</b>	
I hereby certify and return that <input checked="" type="checkbox"/> I have personally served, <input type="checkbox"/> I have legal evidence of service, <input type="checkbox"/> I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.						
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).						
Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)				Date of Service <b>8/20/08</b>	Time am <b>2:45</b> pm <b>(circled)</b>	
				Signature of U.S. Marshal or Deputy <i>Karen A. Shook</i>		
Service Fee <b>45.00</b>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <b>45.00</b>	Advance Deposits	Amount Owed to US Marshal or	Amount or Refund

REMARKS: